



Kansas Early Head Start

— Program Guide —
2016



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SECTION I: Introduction

What is the Kansas Early Head Start Program Guide?

The Kansas Department for Children and Families (DCF) has prepared this Kansas Early Head Start (KEHS) guide to provide direction to KEHS grantees regarding financial and administrative management of DCF-funded grant awards. This document is intended to:

- Serve as a starting point to assist KEHS grantees in implementing their DCF-funded grant award
- Give KEHS grantees a clearer understanding of DCF's expectations regarding the KEHS program
- Move KEHS grantees toward a more uniform program structure

History of KEHS

In order to better support infants and toddlers in Kansas, Governor Bill Graves initiated KEHS in 1998, pursuant to a recommendation by the Kansas Advisory Committee. By augmenting the Child Care Development Block Grant, Kansas became the first state in the nation to create a state-federal funding partnership through Early Head Start. DCF, formerly Social and Rehabilitative Services (SRS), was designated as the lead agency to oversee KEHS.

Funding Flow

Funding for KEHS originates with the federal government through the Child Care Development Fund (CCDF) and the Temporary Assistance for Needy Families (TANF) block grant. This funding is awarded to DCF, who serves as the Lead Agency for the funds. DCF then distributes funding to KEHS programs through a grant process. As a result of the flow of funds and the partnership between DCF and the Federal Administration for Children and Families, KEHS has a unique set of governing regulations. These include:

- Federal Head Start Program Performance Standards (HSPPS)
- Federal CCDF Regulations
- Federal TANF Regulations
- Office of Management and Budget (OMB) Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR Part 200)
- Kansas Department of Health and Environment (KDHE) Child Care Licensing Regulations
- DCF Policies and Procedures as outlined in the Notice of Grant Award, the KEHS Program Guide, the DCF Grant Manual, and through ongoing instructions provided by the KEHS program manager

While this document will be shared with the Federal Administration for Children and Families, it is intended to provide guidance specifically related to the DCF grant award only.



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SECTION II: Child Care Partnerships

KEHS includes two options for providing a comprehensive service approach for at-risk families: Child Care Partnerships (CCP) or Home Visitation (HV). This section will discuss the CCP option. Through the CCP option, which is funded by CCDF, a grantee forms a partnership with a licensed community-based center or licensed home child care facility to provide services for families receiving subsidies through the DCF Child Care Assistance (CCA) program. In some cases, the grantee may also be the operator of the center.

CCDF Federal Funding Description

CCDF, the funding source for Kansas Early Head Start – Child Care Partnerships (KEHS-CCP), was created by Congress in 1996, by the Personal Responsibility and Work Opportunity Reconciliation Act, commonly known as the “Welfare to Work” plan. This comprehensive welfare reform plan included a new consolidation of monies for child care that merged funding from the Social Security Act with funding from the Child Care and Development Block Grant of 1990. The merger became the CCDF and is administered federally by the Office of Child Care, under the Administration for Children and Families in the Department of Health and Human Services.

CCDF began with a primary goal of helping low-income mothers transition off of public assistance and into the workforce by increasing access to child care. The focus, however, has shifted over time to include improving the *quality* of child care as a complementary and interwoven purpose. The fund aims to have a true two-generational impact, with dollars helping to provide job training or educational opportunities for parents, while also supporting safe, learning-based, quality environments for the nation’s most disadvantaged children.

CCDF strives to offer significant flexibility to the lead agencies of each state, territory or tribe administering the funded programs. One of the key goals is allowing these agencies the freedom to develop programs and policies reflective of the needs of their specific state’s children and families. In Kansas, this is demonstrated through the creation and ongoing administration of KEHS.



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CCDF Federal Funding Regulation

Because funding for KEHS-CCP originates from CCDF, federal guidelines and regulations must be followed on all grants awarded by DCF. In this guide, the relevant CCDF federal guidelines highlighted in the Notice of Grant Award will be emphasized and briefly summarized. These guidelines include parts 98 and 99 under Title 45 of the Code of Federal Regulations (CFR). All organizations receiving funds under the CCDF, including the lead agency, grantees and sub-grantees or partners, are subject to and should be familiar with these guidelines.

PART 98

Child Care & Development Fund

Part 98 provides detailed goals, purposes and definitions associated with the CCDF. Included in these purposes is a list of basic expectations placed on the lead agency (DCF), which is comprised of the following:

- Maximize parental choice through the use of certificates and through grants and contracts
- Include a broad range of child care providers, including center-based care, family child care, in-home care, care provided by relatives and sectarian child care providers in program offerings
- Provide quality child care that meets applicable requirements
- Coordinate planning and delivery of services at all levels
- Design flexible programs that provide for the changing needs of recipient families
- Administer the CCDF responsibly to ensure that statutory requirements are met and that adequate information regarding the use of public funds is provided
- Design programs that provide uninterrupted service to families and providers, to the extent statutorily possible



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PART 99

Procedures for Hearings for the Child Care & Development Fund

Part 99 addresses the procedures for hearings related to the Child Care and Development Fund, should a hearing ever be necessary. Specifically, hearings would be in reference to two sections of Part 98 detailed below.

98.18 refers to approval and disapproval of State CCDF Plans and Plan amendments. If a lead agency's CCDF Plan or a Plan amendment is not approved, it may file a petition asking for reconsideration of the issue. At this point, if a hearing is granted, regulations in Part 99 would be subsequently followed.

98.91 refers to failure by a lead agency (or an entity providing services under contract or agreement with the lead agency) to substantially comply with the CCDF State Plan or with one or more required provisions. If a review or investigation reveals that this is the case and the compliance is not achieved in the appropriate time or manner described in the code, a notice of non-compliance may be issued and a hearing set. At this point, regulations in Part 99 would be subsequently followed.

Important CCDF Regulations for KEHS-CCP Grantees

Administrative Costs	Prohibited Uses of Funds	Audits
By law, DCF cannot use more than five percent (5%) of the aggregate CCDF funds on administration each year. DCF holds grantees to a fifteen percent (15%) cap.	The law specifically states that CCDF funds cannot be used for the purchase or improvement of land, or for the purchase, construction, or permanent improvement of any building or facility.	CCDF holds DCF responsible for ensuring that KEHS grantees are audited in accordance with appropriate audit requirements.

Failure by DCF or its KEHS sub-grantees to comply with any of the CCDF requirements may jeopardize the availability of CCDF funds for KEHS. A copy of DCF's current CCDF State Plan can be found here:

http://www.dcf.ks.gov/services/ees/Pages/Child_Care/Child-care-and-early-education.aspx



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Governing Regulations

Head Start Performance Standards

All KEHS grantees and their partners must adhere to the Federal Head Start Program Performance Standards (HSPPS). These are specifically designed to guide programs toward effective administration of grants and the highest quality of services for families. Programs have eighteen (18) months from the start of the grant to achieve full adherence to the Federal HSPPS for new child care partners only. For current child care partners, a transition plan will need to be submitted and approved by the KEHS program manager if the program will not be fully enrolled due to transitioning children to another model or aging out.

State of Kansas Licensing Requirements

All KEHS-CCP must be with a center or child care home licensed by the Kansas Department of Health and Environment (KDHE). There is no grace period for achieving adherence to KDHE licensing; programs must meet licensing standards from the start of the grant period. Grantees are responsible for ensuring their partners maintain all KDHE licensing requirements, in addition to HSPPS. In the event that these two sets of requirements are in conflict, programs should always choose to follow the more stringent regulation. Licensing regulations for both centers and homes can be downloaded via KDHE:

<http://www.kdheks.gov/bcclr/regs/licensingpreschools.htm>

http://www.kdheks.gov/bcclr/regs/daycare_groupdaycare_regs.html

Partnership with DCF Programs

Child Care Assistance

All KEHS-CCP must be with a center or family child care home which enrolls children who receive DCF Child Care Assistance (CCA) subsidies. The provider has to be an approved DCF provider before they can accept any subsidy children. The KEHS program manager can provide assistance with this process. The KEHS-CCP grantee will determine eligibility for child care assistance prior to completing the KEHS-CCP Referral form for Child Care Assistance. The KEHS-CCP Referral Form for Child Care Assistance will need to be completed and signed by the grantee and the parent. On the referral form, you will select if the family is already receiving child care subsidy or if they are new. The KEHS CCP Referral Form needs to be completed thoroughly with the family and also submitted with a DCF Child Care Assistance application. Please refer to the KEHS Child Care Referral Form for more information and instructions. Furthermore, there will be no co-pay for families enrolled in the KEHS CCP program.

For more information about Child Care Assistance, please call: 1-888-369-4777, or go to http://www.dcf.ks.gov/services/ees/Pages/Child_Care/ChildCareSubsidy.aspx.



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Quality Rating Improvement System (QRIS) Field Test

A Quality Rating Improvement System (QRIS) outlines the elements of quality child care using standardized, research-based criteria. This framework helps improve the quality of early childhood programs, which leads to improved child outcomes through the creation of strong early learning environments. Using a rating system to indicate the level of quality reached by a provider/program, QRIS indicators may include a variety of quality benchmarks. Kansas is currently in the process of developing a statewide QRIS to be field tested in certain communities throughout the state. As partners in the implementation of the grant, grantee staff will be expected to attend periodic program meetings and participate in the development of DCF's QRIS initiative. Program funds may be used to offset travel and substitute coverage for these events.

Child Support Services

Parents are expected to cooperate with Child Support Services and follow established DCF processes. Lack of cooperation will result in disqualification from CCA, as well as termination of participation in KEHS-CCP services.

KEESM 2162 Good Cause for Failure to Cooperate - In rare instances, the caretaker may be deemed to have good cause for refusing to cooperate in establishing paternity and securing support payments. Examples of such cases would be those in which it has been determined that pursuing paternity/support is against the best interest of the child or the caretaker. DCF Employment and Economic Services (EES) staff have the ultimate responsibility for determining the validity of good cause claims. Child Support Services (CSS) and Prevention and Protection Services staff may also be involved in making a recommendation for such determinations to EES.

<http://content.dcf.ks.gov/EES/KEESM/Current/keesm2162.htm>

KEHS-CCP Grantee-Partner Relationships

The importance of cooperation between KEHS-CCP grantees and DCF-approved child care providers cannot be emphasized enough. The crucial underpinning of this model is forming partnerships with local high-quality infant and toddler programs, including both centers and child care homes that provide full-day, full-year services and enroll children who receive DCF CCA subsidies. Partnerships should be formalized in a written agreement detailing the rights and responsibilities of both the grant and the child care provider. Through these relationships, KEHS helps encourage the professional development of program staff and promotes the continuous improvement of the quality of care offered in Kansas communities.

Center-based Option

The Center-based Option occurs in early care and education settings either directly operated by the grantee agency or in other centers in the community. All regulations apply, regardless of the operating entity.



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Services are provided in high-quality, developmentally-appropriate, structured centers in the community. Because centers must adhere to both Federal Head Start Performance Standards and KDHE licensing requirements, all children in the center will benefit from the high-quality care, not just those under KEHS funding. This directly addresses the idea that KEHS services support community-wide growth and development. Staff members also conduct family service visits several times per year (monthly is recommended), and while these may occur in the home or at the center, they are a supplemental component and should not be confused with the delivery of services offered through the Home Visitation Option.

Partnerships through the Center-based Option ensure that comprehensive services, such as physical and mental health support; curriculum, screening and ongoing assessment; nutritious snacks, meals and nutrition education; and family support and engagement extend to all children and families in the partner program. These services, as well as the professional development offered to staff may help a center determine whether KEHS partnership is a worthwhile endeavor. Because the HSPPS may be beyond many centers' basic requirements when developing a child care partnership, it is important to highlight the ways in which making these improvements will advance their program and benefit all of the children, families and employees.

There are 10 Head Start Management Systems essential to a successful partnership with a child care center. They are planning, program governance, human resources, facilities, materials and reporting, recordkeeping and recording, communication, ongoing monitoring, fiscal management, and self-assessment, as well as eligibility, recruitment, selection, enrollment and attendance (ERSEA).

Specific guidance for effective implementation of these systems can be found at <http://eclkc.ohs.acf.hhs.gov/hslc/tta-system/ehsnrc/poi/ehs-ccp/tip-sheet-12-part-2.html>.

Child Care Home Option

The Child Care Home Option, referred to federally as Family Child Care Homes, occurs in a licensed private home or licensed family-like group care setting approved by DCF CCA in advance. DCF CCA-approved family child care partnerships have some unique challenges, but can be an excellent choice in small communities where larger centers are few or absent altogether. Like the Center-based Option, programs must adhere to both KDHE licensing requirements and federal HSPPS, but also have some distinct guidelines, particularly in the areas of provider qualifications and adult-to-child ratio.

Because DCF CCA-approved home settings have not traditionally been associated with structured or educational care, the first step in choosing this option is often to overcome these stereotypes and educate the community on the inherent value of the partnership. This option is an opportunity for KEHS to support the professional development and continuing education of providers in the community, while allowing parents the choice of having a small home or family-like environment for their children. In many communities,



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care options for infants and toddlers are scarce, so improving the access, quality and collaboration with home providers is crucial to effectively supporting these most vulnerable populations.

KEHS-CCP Grantee-Partner Requirements

General Grantee Responsibilities

In the written Child Care Partnership Agreement, grantees commit to the following:

- Ensuring the provision of all services detailed below under the headings “Comprehensive Service Delivery” and “Direct Service Components”
- Ensuring all administrative and financial requirements are met
- Ensuring all teachers meet minimum staff qualifications
- Ensuring that professional development, coaching and supervision is offered for all teachers with an emphasis on continuity of care
- Ensuring that the family service worker and child care provider hold parent conferences, as needed, but no less than two times per program year to enhance the knowledge and understanding of both staff and parents of the child’s education and developmental programs and activities in the program
- Ensuring that the family service worker/child and family development specialist take an active role between staff, families and communities

General Partner Responsibilities

In the written Child Care Partnership Agreement, partners commit to the following:

- Maintaining enrollment with DCF as an approved CCA subsidy provider
- Ensuring that all KEHS teacher-to-child ratios and group sizes meet Head Start Performance Standards
- Implementing an evidence-based curriculum that is developmentally-appropriate for infants and toddlers
- Conducting ongoing assessments of children to individualize instruction and learning
- Providing health and nutrition services, including developmental screening and follow-up referrals
- Engaging parents in the full range of family support services
- Collaborating with the family service worker to support families

Community Needs Assessment

All services delivered through KEHS should be guided by the grantees’ Community Needs Assessment, which must be conducted every five years. This is a



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comprehensive evaluation of the community and population, including demographics, geographical area, and economic distribution and existing resources for children and families in the areas of education, health, social service and early intervention for disabilities. Data should be collected from members of the general community as well as representatives from family service professions in the area and may be gathered via open forums, town meetings, individual interviews, focus groups, community surveys or other appropriate methods that capture adequate information.

The Community Needs Assessment is vital for developing the most effective plan for KEHS services, because it is the basis for understanding the environment in which programs will work. Knowing the opinions of the citizens about the strengths and weaknesses in their communities will help determine the largest areas of need and will give KEHS staff the ability to either create or adjust services accordingly. Taking this holistic approach also ensures that programs have the best impact possible and that services are not being delivered unnecessarily or ineffectively.

Comprehensive Service Delivery

Because the purpose of KEHS is multi-faceted, grantees are required to provide an extensive array of services. Child and family support must be direct, early, continuous, intensive, comprehensive, and must follow the Federal HSPPS at all times. The program aims to improve children's development across all areas: physical, social, emotional, and cognitive, while also providing widespread resources for parents. To meet these broad goals, programs must operate in collaboration with many other agencies and organizations in their communities.

Developing strong relationships with other family resources offered in a community is a crucial first step in providing the required comprehensive services model. Programs must work to establish open communication and a framework for building a true team effort among service providers in their area if they wish to have successful and streamlined delivery. This may require many initial meetings to become familiar with the current operations, but learning about the various agencies and beginning positive partnerships should be a natural byproduct of conducting the Community Needs Assessment. Once these initial bonds are formed, KEHS programs should consider it a key responsibility to maintain and cultivate them, so the children in the community are receiving every benefit available.

Direct Service Components

Child Care and Development

- Curriculum is developmentally-appropriate, evidence-based and addresses all areas of development, including cognitive, social-emotional, language, motor, and self-help. It is designed with clear objectives and goals for individual children, and is planned with input from family members, teachers and other relevant staff.



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- Developmental screening occurs within 45 days of a child's enrollment, including the areas of vision, hearing, behavior, motor skills, language, cognition, perception, nutrition and social-emotional development. The Ages & Stages Questionnaire and Ages & Stages Questionnaire: Social Emotional are preferred screening tools for KEHS.
- Assessment will occur regularly to guide instructional practice, professional development and to continuously communicate children's progress with families. Feedback to parents should also occur formally at least two times annually. Teaching Strategies Gold is the preferred assessment tool of KEHS.
- Continuity of Care is provided by maintaining a core group of adults who develop consistent, attached relationships with children. All efforts are made to keep transitions and staff changes at a minimum, while adhering to Head Start Performance Standards and Kansas Department of Health and Environment (KDHE) licensing regulations at all times.

Health Services

- Consultants in the areas of nursing, health education or administration, and public, maternal or child health are secured for support and guidance in medical services.
- Primary medical care and dental care connections are established for families by making appropriate referrals and by helping access available resources. Follow-up and tracking of medical and dental care is also provided.
- Mental health services are provided by acquiring support and consultation from a licensed mental health professional who specializes in children and families. Parents are included in ongoing discussions of mental health and are assisted with resources for accessing social, emotional or behavioral intervention. Consultation also includes regular updates on improving program behavioral practices, helping children with challenging mental issues, promoting mental wellness and utilizing community resources.
- Immunizations are recorded and tracked in accordance with all KDHE regulations. Families receive help in accessing updated immunizations.
- Safety is ensured at all settings with ongoing safety scans, checklists and adherence to all Head Start Performance Standards and KDHE licensing regulations, including detailed written procedures for all types of emergencies.
- Nutrition services are provided by acquiring support and consultation from a registered dietician or nutritionist. Meals are nutritious, varied, incorporate children's special dietary needs and cultural practices and are served in a family-style setting. All KEHS-CCP centers or homes participate in a United States Department of Agriculture (USDA) food reimbursement program, such as the Child and Adult Care Food Program.

Parent and Family Engagement

- Family service workers or child and family development specialists are employed by each KEHS CCP grantee. This individual plays a critical role in service



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delivery. A key duty is establishing a Family Partnership Agreement with each family that outlines the responsibilities of the family and staff, including details on the requirement for a *minimum* of 30 hours per week of approved activities and timetables and strategies for meeting individual goals. The family service worker coordinates all outside resources and manages collaborative relationships between staff, families and community.

- Family service visits are led by the child care provider and can be assisted by the Family Service Worker (FSW) to help develop and strengthen their relationships with families. This is designed to maintain open and comfortable communication between parents, providers and KEHS employees. Once-a-month visits are recommended, and family service workers should strive to mentor child care providers through the process.
- Governance by a formal structure is required of each KEHS CCP grantee. The governing body has legal and fiscal responsibility and should have members whose expertise is in these areas. It should also be reflective of the community served and include former KEHS parents.
- Policy Councils are elected for each KEHS-CCP grantee and include community members, yet the majority of spaces are filled by current parents in the program. The Policy Council should be informed of the day-to-day operations and direction of the program.
- A program must establish a parent committee comprised exclusively of parents of currently-enrolled children as early in the program year as possible. This committee must be established at the center level for center-based programs and at the local program level for other program options. When a program operates more than one option, parents may choose to have a separate committee for each option or combine membership. A program must ensure that parents of currently-enrolled children understand the process for elections to the Policy Council or Policy Committee and other leadership opportunities. A few requirements of the Parent Committees include the following minimum responsibilities:
 1. Advise staff in development and implementation of local program policies, activities and services to ensure they meet the needs of children and families;
 2. Have a process for communication with the Policy Council and Policy Committee; and
 3. Within the guidelines established by the governing body, Policy Council or Policy Committee, participate in the recruitment and screening of Early Head Start employees.

Community Collaboration

Examples of organizations that could be collaborative partners in a community:

- Parents as Teachers



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- Part B and Part C Early Intervention providers
- Healthy Families
- Job training programs
- Unemployment assistance
- Personal finance education
- Marriage and family strengthening programs
- Child abuse prevention programs
- Women Infants and Children (WIC)/ Nutrition education
- Medical and dental professionals
- Mental health agencies
- SafeKids Worldwide or local subsidiaries
- Parks and Recreation facilities
- Services or shelters for homelessness, domestic violence, food insecurity

The level at which a KEHS program collaborates with any or all of these agencies will be determined by the Community Needs Assessment and will fluctuate over time as the needs of the particular children and families evolve. For example, in the event of a natural disaster in the area, services in the areas of housing, food, mental health trauma and medicine might become far more essential and at the forefront of the cooperative efforts. Alternatively, if a large local company shuts down, a KEHS program might increase its collaboration and communication with unemployment and financial services in the area. As with most aspects of KEHS, there is ample freedom to develop the relationships to appropriately fit the strengths and weaknesses in a specific community.

Examples of how inter-agency collaboration might function:

- Periodic meetings between leadership of each agency
- Regular communication via a child's Individual Family Service Plan (IFSP) or Individualized Education Program (IEP) team
- Serving on each other's board of directors or governing body
- Co-presenting professional development or in-service opportunities for early childhood service providers
- Co-hosting educational events for families, children or caregivers
- Cross promoting community services via newsletters, brochures, email list-serves, support groups, online forums, etc.
- Offering transportation to and from different agencies or opportunities, such as medical or dental appointments, developmental screenings, safety events or support groups
- Combining social events or play groups for families across the community to develop relationships and support
- Reaching out to new medical professionals in the community to be sure they are aware of the existing partnerships and ways services can be complementary
- Grant writing together for alternative sources of funding for special projects



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It is important to note that a common challenge with offering such a comprehensive model is avoiding duplication of services. Because funding and an available workforce are often scarce in social service, programs must take extra care not to waste time or effort developing services that are already available and functioning. Again, a thorough Community Needs Assessment should help combat this challenge, but programs should be continuously re-assessing the array of resources available in their region and adjusting accordingly. Strong communication lines between the leadership of all agencies will be vital to making sure neither competition nor redundancy is occurring and resulting in less effective assistance for the families in the area.

Self-Evaluation

To accurately assess progress toward outcomes, improve overall quality and identify appropriate goals for the future, all KEHS grantees must conduct a multi-faceted self-evaluation each year. Three formalized plans are conducted, including a Continuous Quality Improvement Plan for the overall partnership, Professional Development Plans for individual staff members, and a Training and Technical Assistance Plan for each partner.

The Continuous Quality Improvement Plan

The Continuous Quality Improvement Plan is part of an ongoing process that analyzes strengths and weaknesses, measures program effectiveness and informs goals or plans for change. The plan must:

- Include a process for submission to KEHS Program Management
- Be available for review upon site visits
- Include staff, families, children and stakeholders at all levels
- Use both monitoring visits and other agency-specific strategies to document and review program, classroom and teacher performance
- Incorporate:
 - Sources of evidence for areas needing improvement
 - Measurable goals, defined objectives and a description of strategies for accomplishment
 - Timelines for implementation of strategies and identified; persons responsible for monitoring progress toward goals
 - Follow-up procedures for review at least annually

Individual Professional Development Plans

Individual Professional Development Plans are required of all teaching staff working directly with KEHS children in a KEHS-CCP. Continuing education and training of individual employees is an essential element of improving overall program quality. Plans should be relevant to the staff members' job duties and should be reflective of individual goals and areas of needed improvement.



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Training and Technical Assistance Plans

Training and Technical Assistance Plans are developed jointly between the grantee and partner based on the needs identified in the Individual Professional Development Plans. For example, if a number of teachers desire to learn more about social-emotional development, the training plan might include a presentation by a local mental health provider and follow-up referral guidance. Grantees receive dedicated grant funds to offer the appropriate professional development opportunities to partners.

A program must establish and implement a systematic approach to staff training and professional development designed to assist staff in acquiring or increasing the knowledge and skills needed to provide high-quality, comprehensive services within the scope of their job responsibilities and attached to academic credit as appropriate.

SECTION III: Home Visitation

KEHS includes two options for providing a comprehensive service approach for at-risk families: Child Care Partnerships (CCP) or Home Visitation (HV). This section will discuss the HV option. Through the HV option, which is funded by TANF, a grantee provides a home-based service model that does not include a child care component.

TANF Federal Funding

The Temporary Assistance for Needy Families (TANF) block grant was created by Congress in 1996, by the Personal Responsibility and Work Opportunity Reconciliation Act, commonly known as the “Welfare to Work” plan. TANF replaced Aid to Families with Dependent Children (AFDC), which had provided cash welfare to low-income families with children since 1935. Through TANF, states receive a block grant from the federal government, which they are required to supplement with state spending for low-income families. This requirement is called the Maintenance of Effort (MOE).

The following four goals describe how states may utilize federal TANF and State MOE funding.

Provide assistance to needy families so that children may be cared for in their own homes or in the homes of relatives.	End the dependence of needy parents on government benefits by promoting job preparation, work, and marriage.	Prevent and reduce the incidence of out of wedlock pregnancies and establish annual numerical goals for preventing and reducing the incidence of these pregnancies.	Encourage the formation and maintenance of two parent families.
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Because the TANF goals are quite broad, states have flexibility in developing the types of services they see most fitting for their needs. Some examples across the United States include child abuse and neglect prevention, job training and education for



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parents, employment counseling, transportation assistance and child care or early education support. Due to its comprehensive service approach, KEHS-HV is uniquely situated to help address all four of the TANF goals.



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TANF Federal Funding Regulations

Because funding for KEHS-HV originates from TANF, federal guidelines and regulations must be followed on all grants awarded by DCF. In this guide, the relevant TANF federal guidelines highlighted in the Notice of Grant Award will be emphasized and briefly summarized. These guidelines include parts 260-265, under Title 45 of the Code of Federal Regulations (CFR). All organizations receiving funds under CCDF, including the lead agency, grantees and sub-grantees or partners, are subject to and should be familiar with these guidelines.

PART 260

General TANF
Provisions

Subpart A: What rules generally apply to the TANF program?

Subpart A provides detailed goals, purposes and definitions associated with TANF funding, while also outlining various State-level regulations. It reviews 4 federal laws which must be followed by all agencies and programs utilizing TANF, including:

- Age Discrimination Act of 1975
- Section 504 of the Rehabilitation Act of 1973
- Americans with Disabilities Act of 1990
- Title VI of Civil Rights Act of 1964

Subparts B and C cover State-level regulations on requirement waivers related to services involving domestic violence and welfare reform, respectively.

PARTS 261-265

Parts 261-265 cover TANF regulations which apply to State-level management of funds, so while they may not directly affect services at the Home Visitation level, familiarity with these portions is recommended. Included are regulations regarding work requirements, possible penalties, misuse of funding and a range of detailed accountability topics.



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Governing Regulations

Head Start Performance Standards

All KEHS grantees and their partners must adhere to the Federal Head Start Program Performance Standards (HSPPS). These are specifically designed to guide programs toward effective administration of grants and the highest quality of services for families.

KEHS-HV Program Requirements

Community Needs Assessment

All services delivered through KEHS should be guided by the grantees' Community Needs Assessment, which must be conducted every three years. This is a comprehensive evaluation of the community and population, including demographics, geographical area, and economic distribution and existing resources for children and families in the areas of education, health, social service and early intervention for disabilities. Data should be collected from members of the general community as well as representatives from family service professions in the area and may be gathered via open forums, town meetings, individual interviews, focus groups, community surveys or other appropriate methods that capture adequate information.

The Community Needs Assessment is vital for developing the most effective plan for KEHS services, because it is the basis for understanding the environment in which programs will work. Knowing the opinions of the citizens about the strengths and weaknesses in their community will help determine the largest areas of need and will give KEHS staff the ability to either create or adjust services accordingly. Taking this holistic approach also ensures that programs have the best impact possible and that services are not being delivered unnecessarily or ineffectively.

Comprehensive Service Delivery

Because the purpose of KEHS is multi-faceted, grantees are required to provide an extensive array of services. Child and family support must be direct, early, continuous, intensive, comprehensive and must follow the federal HSPPS at all times. The program aims to improve children's development across all areas: physical, social, emotional and cognitive, while also providing widespread resources for parents. To meet these broad goals, programs must operate in collaboration with many other agencies and organizations in their communities.

Direct Service Components

Services are provided through 90-minute weekly home visits to each enrolled child and family. In keeping with the goals of KEHS, even though the primary service delivery is happening in the home, this approach is still comprehensive in nature and helps parent's access resources and education for all areas of their family's development. The home visitor provides child-focused sessions that promote the parents' ability to support the child's development and encourage them to later recreate and build on the activities that are introduced. Twice per month, the Home Visitation program should offer



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opportunities for parents and children to come together as a group for learning, discussion and social activity. The social settings allow parents to collaborate with others in the program and share experiences, ideas and support.

The key component of the Home Visitation Option is the strength of the relationship cultivated between the home visitor and the family. There must be a solid foundation and a gradual building of trust for the relationship to most optimally benefit the child. A formal Family Partnership Agreement should be in place that will outline the agreed-upon schedule and the specific roles of both parents and staff. Home visitors will work closely with parents to ensure that goals and experiences are congruent with the family's culture and will use responsive interactions as the primary mode for assessing needs and developing future plans or curriculum. Home visitors will also assist parents who are unemployed to seek employment, return to school or enter a TANF-approved training program.

Community Collaboration

Examples of organizations that could be collaborative partners in a community:

- Parents as Teachers
- Part B and Part C Early Intervention providers
- Healthy Families
- Job training programs
- Unemployment assistance
- Personal finance education
- Marriage and family strengthening programs
- Child abuse prevention programs
- Women Infants and Children (WIC)/Nutrition education
- Medical and dental professionals
- Mental health agencies
- SafeKids Worldwide or local subsidiaries
- Parks and Recreation facilities
- Services or shelters for homelessness, domestic violence, food insecurity

The level at which a KEHS program collaborates with any or all of these agencies will be determined by the Community Needs Assessment and will fluctuate over time as the needs of the particular children and families evolve. For example, in the event of a natural disaster in the area, services in the areas of housing, food, mental health trauma and medicine might become far more essential and at the forefront of the cooperative efforts. Alternatively, if a large local company shut down, a KEHS program might increase its collaboration and communication with unemployment and financial services in the area. As with most aspects of KEHS, there is ample freedom to develop the relationships to appropriately fit the strengths and weaknesses in a specific community.

Examples of how inter-agency collaboration might function:



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- Periodic meetings between leadership of each agency
- Regular communication via a child's IFSP or IEP team
- Serving on each other's board of directors or governing body
- Co-presenting professional development or in-service opportunities for early childhood service providers
- Co-hosting educational events for families, children or caregivers
- Cross promoting community services via newsletters, brochures, email list-servs, support groups, online forums
- Offering transportation to and from different agencies or opportunities, such as medical or dental appointments, developmental screenings, safety events or support groups
- Combining social events or play groups for families across the community to develop relationships and support
- Reaching out to new medical professionals in the community to be sure they are aware of the existing partnerships and ways services can be complementary
- Grant writing together for alternative sources of funding for special projects

It is important to note that a common challenge with offering such a comprehensive model is avoiding duplication of services. Because funding and an available workforce are often scarce in social services, programs must take extra care not to waste time or effort developing services that are already available and functioning. Again, a thorough Community Needs Assessment should help combat this challenge, but programs should be continuously re-assessing the array of resources available in their region and adjusting accordingly. Strong communication lines between the leadership of all agencies will be vital to making sure neither competition nor redundancy is occurring and resulting in less effective assistance for the families in the area.



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SECTION IV: DCF Grant Management

This section of the program guide provides a brief overview of DCF-specific policies and procedures. Grantees should always contact the KEHS program manager with any questions.

Reference Document

DCF Grant Manual

With a strategic focus on strengthening families, safely reducing the number of children in care, promoting employment, exercising responsible stewardship of public resources, and building public/private partnerships, DCF issued a Grant Manual in summer 2014 to provide a summary of DCF grant procedures to ensure that grant funds are being administered judiciously. KEHS grantees are required to follow the policies and procedures set forth in the grant manual in administering their KEHS grant.

To access the entire grant manual, please visit:

<http://www.dcf.ks.gov/Agency/Operations/Documents/GRANT.MANUAL-GRANTEE.accessible.PDF>.

Notice of Grant Award

The Notice of Grant Award contains all requirements imposed on individual KEHS grantees by DCF, whether by statute or regulation. The rights and obligations of KEHS grantees and DCF are set forth in the Notice of Grant Award and its attachments. KEHS grantees are required to follow the requirements set forth in the Notice of Grant Award in administering their KEHS grant.

Relationship between DCF Grant Manual, Notice of Grant Award and KEHS Program Guide

The DCF Grant Manual, along with the KEHS Notice of Grant Award, has informed the guidance provided in this program guide. This program guide does not replace nor supersede either the DCF Grant Manual or the KEHS Notice of Grant Award. Rather, the program guide, in conjunction with the DCF Grant Manual and the KEHS Notice of Grant Award, are intended to provide as clear of a picture as possible of DCF requirements. In addition to this program guide, grantees should continue to consult both the DCF Grant Manual and the KEHS Notice of Grant Award to guide their financial and administrative management of their KEHS program. Grantees should always contact the KEHS program manager with any questions.



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Payments & Purchases

Office of Management and Budget (OMB) Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards

Grantees should be aware of and understand the requirements set forth in the OMB Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR Part 200).

This guidance supersedes and combines the requirements of eight existing OMB Circulars (A-21, A-50, A-87, A-89, A-102, A-110, A-122 and A-133) with the intent to streamline the federal grant-making and monitoring process, to ease the administrative burden for grant applicants and recipients and to reduce the risk of waste, fraud and abuse.

Subpart E (Cost Principles) of the Uniform Administrative Requirements provides details regarding the expenditure of funds, including which costs are allowable.

Advance Payments toward KEHS Award

DCF will not issue any advance payments to KEHS grantees. DCF will reimburse KEHS grantees for services rendered under the KEHS Grant Award on a monthly basis. Using the appropriate forms, grantees must submit a monthly status report, budget transaction report and budget itemization report to the KEHS program manager in order to receive payment.

Purchase of Vehicles Using KEHS Funds

Subpart D. Post-Federal Award Requirements of the Uniform Administrative Requirements provides guidance regarding the purchase of vehicles in Sections 200.313 (Equipment) and Section 200.439 (Equipment and other Capital Expenditures). Section 200.313 requires equipment purchased to be used in the program or project for which it was acquired, whether or not the project or program continues to be supported by the federal award. Section 200.439 states capital expenditures for general purpose equipment are unallowable as direct charges except with the prior written approval of the federal awarding agency or pass-through entity.

Use of vehicles for personal use is not an allowable grant expense, whether or not it is reported as taxable income (Section 200.445). Additionally, costs charged to awards must be reasonable and necessary for the performance of the award (Section 200.403). These factors must be considered when claiming costs of vehicle use by employees, such as driving them home at night. The grantee should have written travel policies which address this use. Grantee's need to ensure adequate documentation to support costs as reasonable, allocable and necessary.

Purchase of Equipment

All purchases of equipment must be submitted by the KEHS grantee to the KEHS program manager and subsequently approved before any purchase of equipment is



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made. Equipment is defined as an article of tangible personal property that has a useful life of more than one year and an acquisition cost of \$1,000 or more. KEHS grantees should use form OGC-4004 when submitting their request.

Personnel Activity Reports

Subpart E. Cost Principles - Section 200.430 of the Uniform Administrative Requirements covers compensation for personnel services. It includes a section related to standards for documenting personnel expenses. The new circular does not specifically require personnel activity reports to be maintained. It does, however, require charges to grant awards to be based on records that accurately reflect the work done. The standards for documentation of personal services are listed in Subpart E. Cost Principles – Section 200.430. Budget estimates alone do not qualify as support.

Grantees must be able to demonstrate the charges to grant awards are accurate, allowable and properly allocated.

Indirect Costs

Indirect costs means those costs incurred for a common or joint purpose benefitting more than one cost objective, and not readily assignable to the cost objectives specifically benefitted, without effort disproportionate to the results achieved. Often these costs are not readily identifiable with a particular award, project, program or service. Indirect costs should not exceed 10 percent of the grant budget.

DCF Acceptance of Negotiated Indirect Cost Rate

The Office of Management and Budget Super Circular does reference the allowance of a federally-approved cost plan. If there is a plan, the rate may be negotiated or the minimum approved rate of 10 percent can be used. There is an allowance for a reduction if the amount of indirect costs is limited by law. Grantees cannot go over the 15 percent cap on administrative costs. Consider the 15 percent administrative cost rate cap when calculating indirect cost rates.

Administrative Costs

TANF and CCDF each define Administrative Costs uniquely, so KEHS grantees should always carefully examine the requirements in their Notice of Grant Award from each agency.

For a complete definition on TANF Administrative Costs Regulations, Home Visitation grantees should see Section 263.13 of Title 45 of the Code of Federal Regulations. For a complete definition of CCDF Administrative Costs Regulations, Child Care Partnerships grantees should see Section 98.52 of Title 45 of the Code of Federal Regulations.



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Medical Services

A specific statutory provision exists which prohibits the spending of TANF funds on medical services. For this reason, KEHS Homes Visitation grantees must utilize other non-TANF funding if they wish to provide assistance with medical services for a current family or a pregnant mother who plans to enroll the child upon birth. Funds may be used for screenings and assessments, but not treatment.

Reporting

The required reporting forms can be found in Section V: Contact Information and Sample Forms. The KEHS program manager will instruct grantees on a routine basis regarding required reporting forms.

Federal Funding Accountability and Transparency Act

For purposes of grant submission and grant renewal, KEHS grants are subject to the Federal Funding Accountability and Transparency Act of 2006. For detailed information about these requirements, please see

<http://www.dcf.ks.gov/Agency/Operations/Pages/Grantee-Resources.aspx>.

DAISEY Reports

Data for the following are reported using Data Application and Integration Solutions for the Early Years (DAISEY), a web-based shared measurement system housed on a secure, HIPAA-compliant server at the University of Kansas: <http://daiseysolution.com/>. Training and Technical Assistance is available for all DAISEY users.

Each KEHS model will have different DAISEY forms. These forms are subject to change based on reporting requirements, including changes to Head Start Performance Standards.

Performance Reports

Performance Reports are required quarterly, due on Oct. 30, Jan. 30, April 30, and July 30.

Data and Outcomes Reports

Data and Outcomes Reports are required quarterly, due on Oct. 30, Jan. 30, April 30, and July 30.

Grantees will continuously collect and enter data using the following tools:

- Ages & Stages Questionnaire (ASQ-3)
- Ages & Stages Questionnaire: Social Emotional (ASQ:SE-2)
- Protective Factors Survey (PFS)



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Monthly Status Report

Status Reports must be submitted by each KEHS grantee agency to the KEHS program manager by the 20th of each month to secure payment. KEHS grantees should use form OGC-1006.

Monthly Budget Transaction Report

KEHS grantees are reimbursed for services on a monthly basis. Budget Transaction Reports must be submitted by each KEHS grantee agency to the KEHS program manager by the 20th of each month to secure payment. KEHS grantees should use form OGC-1005. Budget Transaction Reports will not be processed without a Status Report for the reporting period on file, a Budget Itemization Report, and any other required documentation as established in the grant award. After review of the information, as necessary, additional information related to specific expenditures, such as invoices, may be requested.

Program Income

Program income cannot be listed on the Budget Transaction Report as a separate line item. Program income should be applied to a line item or line items on the Budget Itemization Report. The program income will show a description of what the program income was and the credit applied.

Monthly Budget Itemization Reports

KEHS grantees must submit budget itemization reports to the KEHS program manager by the 20th of each month. KEHS grantees should use form OGC-4005. Budget Itemization Reports enumerate the expenses listed in the Budget Transaction Reports in greater detail, itemizing them by line item. The subtotals on the Budget Itemization Reports must match the line item figures on the Budget Transaction Reports. **The Budget Itemization Report is mandatory—agency ledgers will not be accepted.** Receipts are to be kept on file at the KEHS grantee agency.

Final Grant Year Budget Transaction Report

The last Budget Transaction Report of the grant period shall be marked “FINAL,” and submitted by the grantee promptly following completion of the work under this grant, but in no event later than sixty (60) days from the date of such completion or Aug. 30, whichever date comes first. On the Budget Transaction Report, the grantee will mark the box Y for final report. The KEHS program manager will confirm via email that this is their final payment for that grant year. After payment of the Final Invoice (Final Payment), no further amount shall be due or payable by DCF under this grant.

Budget Revisions or Modifications

KEHS grantees may submit a budget revision request to the KEHS program manager during their grant year if they would like to move funding from one line item to another,



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within the existing grant year, without changing the total expense amount of their approved grant budget. If the requested funding change is less than 10 percent of the line item where the money is coming from, no revision is required. KEHS grantees must still provide notice of the line item change(s) and justification for the change to the KEHS program manager.

KEHS grantees should use form OGC-1008 when submitting their request. Revision requests will not be accepted during the last thirty (30) days of the grant year.

DCF Compliance Oversight

Expenditures over \$750,000

Entities that spend more than \$750,000 in federal awards during the fiscal year must have a single audit which meets the following requirements:

- Is conducted according to Generally Accepted Government Auditing Standards
- Determines whether all financial statements are in accordance with Generally Accepted Accounting Principles (GAAP), including a Schedule of Expenditures of Federal Awards (SEFA)
- Includes Internal Control Testing
- Includes Compliance Testing

Expenditures under \$750,000

Entities that spend less than \$750,000 in federal awards during the fiscal year must have a Financial/Compliance audit conducted in accordance with the DCF Recipient Monitoring Policy and include assurances of the following:

- Compliance with administrative requirements and cost principles contained in the Office of Management and Budget Cost Circulars
- Compliance with guidance contained in the Code of Federal Regulations for CCDF (Child Care Partnerships) or TANF (Home Visitation)
- Compliance with DCF grant award conditions and other State regulations
- Effective financial accountability and controls over grant funds

DCF Program Staff Site Visits

Currently, there is no set schedule regarding DCF program staff site visits to KEHS grantees. DCF reserves the right to conduct a site visit and will provide grantees with reasonable advanced notice of a visit.

Quarterly Program Meetings

KEHS Program Meetings are held on a quarterly basis. The meetings are typically scheduled for the first Thursday of March, June, September and December, yet are subject to change. KEHS grantees are required to send at least one representative to each meeting. This representative should be someone who has the authority and ability



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to relay information back to the KEHS grantee management. These meetings are an opportunity for conversation related to the administration of the KEHS grant awards and are most effective when grantees are engaged in suggesting topics for the meetings. KEHS grantees are encouraged to contact the KEHS program manager to propose topics for discussion.

Grantee Concerns and Questions

KEHS grantees should contact the KEHS program manager with any concerns and questions as soon as they arise.

Grant Award Period and Renewal Option

Funding awards will be issued for the funding period of the state fiscal year, which begins July 1, and concludes on June 30 of the following year. Following completion of the first year of the grant award, there will be an option for two (2) one-year (1-year) renewals. Awards are subject to the availability of funds and any modifications or additional requirements that may be imposed by law.

On occasion, DCF may make an amendment to the Notification of Grant Award if the agency would like to extend the grant year-end date, increase/decrease the total expense amount of the approved grant budget authority, or change the scope of work, within the grant year. The KEHS grantee will be made aware of these potential adjustments and will be asked to sign off on them before they are put into place.

Termination of Grant Award

Termination by DCF for Cause.

DCF may terminate a KEHS grant award for cause. Cause for immediate termination is limited to the following: grantee's failure to perform the requirements and conditions set forth in their grant; grantee's material breach of the terms and conditions of this agreement; the willful breach, habitual neglect or other continued failure of the grantee to abide by any law, rule, procedure or policy the grantee has received notice from either DCF or the State of Kansas. In the event that DCF terminates a KEHS grant for cause, the KEHS grantee will be provided written notice of the reasons therefore.

Termination by DCF for Lack of Funding Appropriation.

If sufficient funds are not appropriated to continue the function performed in this agreement and for the payment of the charges. DCF may terminate this agreement at the end of its current fiscal year. DCF agrees to give written notice of termination to the grantee at least thirty (30) days prior to the end of its current fiscal year, and shall give such notice for a greater period prior to the end of such fiscal year as may be provided in this agreement, except that such notice shall not be required prior to ninety (90) days before the end of such fiscal year.



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Termination by KEHS Grantee.

Should a KEHS grantee consider terminating their KEHS grant award with DCF, the grantee is strongly encouraged to contact the KEHS program manager immediately upon such consideration.

Transition Process Following Termination.

DCF will work with KEHS grantee whose award is terminated either by DCF or the grantee to establish a grant close out plan.

SECTION V: Contact Information, Links and Sample Forms

Important Contact Information

Carrie Hastings
Children's Services Manager
Carrie.Hastings@ks.gov
785-368-8127

Heather Mack
Kansas Early Head Start Program Manager
Heather.Mack@ks.gov
785-368-6350

Kimberly Kennedy
Kansas Head Start Collaboration Director
Kimberly.Kennedy@ks.gov
(785) 368-6354

Links

DCF Grantee Manual
<http://www.dcf.ks.gov/Agency/Operations/Documents/GRANT.MANUAL-GRANTEE.accessible.PDF>

Federal Administration for Children and Families
<https://www.acf.hhs.gov/>

Federal Office of Head Start
<http://www.acf.hhs.gov/programs/ohs>



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Head Start Performance Standards

<http://eclkc.ohs.acf.hhs.gov/hslc/standards/hspps>

Temporary Assistance for Needy Families

<http://www.acf.hhs.gov/programs/ofa/programs/tanf>

Federal Office of Child Care

<http://www.acf.hhs.gov/programs/occ/about/what-we-do>

Kansas Department of Health and Environment: Child Care Licensing

<http://www.kdheks.gov/bcclr/>

Federal Office of Management and Budget

<https://www.whitehouse.gov/omb>

Sample Forms

Budget Revision Form

FFATA Form

KEHS Child Care Assistance Referral Form

Monthly Report Forms

Budget Transaction Report

Budget Itemization Report

Status Report

Pre-Approval Equipment Form